



**Department of Public Works
Environmental Protection Division**



**Industrial Wastewater Discharge
Permit Application**

Date: _____

{I} Facility Information: Provide information for the facility.

All Items are to be completed. If an item is not applicable indicate N/A

Company Name:	Industrial Sewer User Permit No.
Facility Address:	
Corporate Facility Address (If Different):	
Business Description:	
Business Expansion within the next 3 to 5 years: (Explanation Y or N)	
Initial Discharge Date:	
Operations Schedule:	
Number of Employees:	
Visitor's Safety Equipment	
Categorical Industrial User No.	
North America Industry Classification No.	
Standard Industrial Classification No.	
Authorized Representative:	Title:
Telephone:	Email:
Secondary Contact:	Title:
Telephone:	Email:

{II} Environmental Permits: List permit number for all applicable categories.

Stormwater			
NPDES			
Hazardous Waste Status (Check One):	[] VSQG	[] SQG	[] LQG
Air Quality			
Recycling			
Flammable Storage			
Other			

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{III} City of Manchester Water Works Account Information: List all City of Manchester Water works Meter number and Locations of meters in facility.

ARB Number	Meter Number	Location in Facility	Area Served

{IV} Facility Water Usage: Describe all water usage, indicating water source, destination, and flow rates. Identify average flow rates (Gallons Per Day) based on historical and/or estimated water usage.

Water Source (<i>check</i>):	<input type="checkbox"/> Private Well / River	<input type="checkbox"/> Public Supply (Manchester Water Works)
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Water Usage	Source (<i>Private/Public</i>)	Destination (<i>Sewer/Specify Other</i>)	Flow Rate (<i>GPD</i>)	Estimate (<i>GPD</i>)
Manufacturing Process				
Cleaning				
Contact Cooling				
Non-Contact Cooling				
Cooling Towers				
Boiler				
Sanitary				
Reclamation				
Air Scrubber				
Evaporation				
Irrigation				
Other				

Total Facility Water Usage = _____

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(Use additional paper to describe processes if necessary)

{VII} Wastewater Treatment Operators and/or Authorized Representatives: Provide information for all operators and/or authorized representatives, including title, typical work shift hours.

Name	Title	Shift Hours

{VIII} Sampling Site Monitoring Equipment: Number all sampling sites (e.g. Site 001) and provide a brief description of their locations. Describe all monitoring equipment, including the make/model of equipment and the frequency of calibration.

Site No.	Sample Site Description	Flow Meter	pH Meter

{IX} Sewer Discharges: Describe each sewer outfall (size/location) and list all discharges to each outfall. Number each connection to correlate with sampling sites described above (e.g. Outfall No. 001). Include discharges from the treatment system, as well as other usages (e.g. sanitary, boiler). Specify whether discharge is Batch [B] or Continuous [C] and include flow rates (Gallons per Day). For batch discharges, indicate the number of batches per day (e.g. 2B = two batches per day).

Outfall No.	Sewer Connection (Size / Location)	[B/C]	Wastewater Discharge (Treatment System / Specify Other)	Discharge Rate (GPD)

(Use additional paper to describe discharges if necessary)

Total Sewer Discharge = _____

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{X} Chemical & Hazardous Waste Storage: Describe all storage of chemicals and hazardous waste, including chemicals stored, storage container types, spill control measures (e.g. secondary containment, spill response equipment), floor drains, and accumulation / consumption rates. Indicate the occurrence of slug releases in the past five years and existence of an updated Slug Control Plan *. Submit a Slug Control Plan to EPD and make the plan available for implementation at the facility.

	Check box to indicate NO slug release / spill of chemicals or hazardous waste in previous five years
	Check box to indicate a written Slug Control Plan is prepared and available for implementation

* The Slug Control Plan must contain, at a minimum, a description of all discharge practices, a description of all chemical storage, a facility site plan indicating the locations of all chemical / hazardous waste storage facilities, a protocol for notifying the Utility of a slug release, a description of spill control measures, and a certification statement attesting to the implementation of the plan.

Storage Site	Chemicals / Waste Stored	Container Type	Spill Control Measures	Destination Of Drains	Accumulation / Consumption Rate

{XI} Monitoring Report for New Businesses: Sample all industrial wastewater discharges from the facility. Submit a Baseline Monitoring Report (BMR)** to the EPD that includes analytical results for the following parameters.

** The BMR must contain a description of sample collection methods (including a description of all sample sites), a EPD self-monitoring report sheet that summarizes the analytical results, all chains of custody documenting the transport of samples, and the analytical results from a state-certified laboratory. Refer to **Standard Methods** for the proper collection and analysis of samples.

Flow	pH	BOD	COD	TSS	TTO's *** 624 / 625
Aluminum	Antimony	Arsenic	Beryllium	Cadmium	Chromium
Copper	Cyanide	Fluoride	Lead	Mercury	Molybdenum
Nickel	Nitrogen	Oil & Grease (Petroleum mineral) 1664 HEM/SGT		Oil & Grease (Animal & vegetable) 1664 HEM	
Phenols	Selenium	Silver	Temperature	Thallium	Zinc

*** TTO's (Total Toxic Organics) = Summation of all quantifiable values greater than 0.01 mg/L for toxic organics listed in 40 CFR 413.02(i). TTO's include PCB's (Poly-Chlorinated Biphenyls), VOC's (Volatile Organic Compounds), SVOC's (Semi-Volatile Organic Compounds). PCB's, VOC's and SVOC's shall be analyzed using EPA Methods 624, and 625, respectively.

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{XII} Monitoring Report for Permit Renewals: Sample all industrial wastewater discharges from the facility. Submit a the Self Monitoring Report (SMR) to the EPD that includes analytical results for the following parameters.

** The SMR must contain a description of sample collection methods (including a description of all sample sites), a EPD self-monitoring report sheet that summarizes the analytical results, all chains of custody documenting the transport of samples, and the analytical results from a state-certified laboratory. Refer to **Standard Methods** for the proper collection and analysis of samples.

Flow	pH	BOD	COD	TSS	TTO's *** 624 / 625
Aluminum	Antimony	Arsenic	Beryllium	Cadmium	Chromium
Copper	Cyanide	Fluoride	Lead	Mercury	Molybdenum
Nickel	Nitrogen	Oil & Grease(Petroleum mineral) 1664 HEM/SGT		Oil & Grease (Animal & vegetable) 1664 HEM	
Phenols	Selenium	Silver	Sulfate	Sulfide	Sulfite
Temperature	Thallium	Zinc	Total Phosphorus		

*** TTO's (Total Toxic Organics) = Summation of all quantifiable values greater than 0.01 mg/L for toxic organics listed in 40 CFR 413.02(i). TTO's include PCB's (Poly-Chlorinated Biphenyls), VOC's (Volatile Organic Compounds), SVOC's (Semi-Volatile Organic Compounds). PCB's, VOC's and SVOC's shall be analyzed using EPA Methods 624, and 625, respectively.

{XIII} Identification of RAW Material and or Pollutants Present

List all raw material and chemicals used in your facility that:

- 1) You know or have reason to believe are present in your discharge, or
- 2) Are hazardous wastes when disposed, or
- 3) Contain priority pollutants.

Refer to Table 1, Page 8 for Priority Pollutant listings and list ID numbers as appropriate on this form. Use additional sheets as necessary. Complete inventor printouts maybe used to provide the information required. Attached Material Safety Data Sheets for all items that have not had MSDSs previously submitted.

Raw Material	Purpose	Amount used /year lbs.	Estimated loss to Sewer

(Attach additional Sheets as needed)

Metals and Cyanide		Organics – Acid Compounds		Organics – Volatile Compounds		Pesticides	
114	Antimony	021	2,4,6-trichlorophenol	002	Acrolein	089	Aldrin
115	Arsenic	022	p-chloro-m-cresol	003	Acrylonitrile	090	Dieldrin
117	Beryllium	024	2-chlorophenol	004	Benzene	091	Chlordane
118	Cadmium	031	2,4-dichlorophenol	006	Carbon tetrachloride	092	4,4-DDT
119	Chromium	034	2,4-dimethylphenol	007	Chlorobenzene	093	4,4-DDE
120	Copper	057	2-nitrophenol	010	1,2-dichloroethane	094	4,4-DDD
121	Cyanide	058	4-nitrophenol	011	1,1,1-trichloroethane	095	Alpha-endosulphan
122	Lead	059	2,4-dinitrophenol	013	1,1-dichloroethane	096	Beta-endosulphan

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Metals and Cyanide		Organics – Acid Compounds		Organics – Volatile Compounds		Pesticides	
123	Mercury	060	4,6-dinitro-o-cresol	014	1,1,2-trichloroethane	097	Endosan sulfate
124	Nickel	064	Pentachlorophenol	015	1,1,2,2-tetrachloroethane	098	Endrin
125	Selenium	065	Phenol	016	Chloroethane	099	Endrin aldehyde
126	Silver			019	2-chloroethylvinyl ether	100	Haptachlor
127	Thallium			023	Chloroform	101	Heptachlor epoxide
128	Zinc			029	1,1-dichloroethylene	102	Alpha – BHC
				030	1,2-trans-dichloroethylene	103	Beta – BHC
				032	1,2-dichloropropane	104	Gamma – BHC
				033	1,3-dichloropropene	105	Delta –BHC
				038	Ethylbenzene	106	PCB – 1242
				044	Methylene chloride	107	PCB – 1254
				045	Methyl chloride	108	PCB – 1221
				046	Methyl bromide	109	PCB – 1232
				047	Bromoform	110	PCB – 1248
				048	Dichlorobromomethane	111	PCB – 1260
				051	Chlorodibromomethane	112	PCB-1016
				085	Tetrachloroethylene	113	Toxaphene
				086	Toluene		
				087	Trichloroethylene		
				088	Vinyl chloride		

Organics – Base Neutral Compounds			
001	Acenaphthene	056	Nitrobenzene
005	Benzidine	061	N-nitrosodimethylamine
006	Asbestos	062	N-nitrosodiphenylamine
008	1,2,4-Trichlorobenzene	063	N-nitrosodi-n-propylamine
009	Hexachlorobenzene	066	Bis (2-ethylhexyl) phthalate
012	Hexachloroethane	067	Butylbenzyl Phthalate
018	Bis (2-chloroethyl) ether	068	Di-n-butyl phthalate
020	2-chloronaphthalene	069	Di-n-octyl phthalate
025	1,2-dichlorobenzene	070	Diethyl phthalate
026	1,3-dichlorobenzene	071	Dimethyl phthalate
026	3,3-dichlorobenzidine	072	Benzo (a) anthracene
027	1,4-dichlorobenzene	073	Benzo (a) pyrene
035	2,4-dinitrotoluene	074	Benzo (b) Fluoranthene
036	2,6-dinitrotoluene	075	Benzo (k) Fluoranthene
037	1,2-diphenylhydrazine	076	Chrysene
039	Fluoranthene	077	Acenaphthylene
040	4-chlorophenyl phenyl ether	078	Anthracene
041	4-bromophenyl phenyl ether	079	Benzo(ghi)perylene
042	Bis (2-chloroisopropyl) ether	080	Fluorene
043	Bis (2-chloroethoxy) methane	081	Phenanthrene
052	Hexachlorobutadiene	082	Dibenzo (a,h) anthracene
053	Hexachlorocyclopentadiene	083	Indeno (1,2,3-cd) pyrene
054	Isophorone	084	Pyrene
055	Naphthalene		
	Miscellaneous		

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{XIV} Facility Site Plan: Submit a Facility Site Plan to the EPD that depicts a building layout for the facility. Locate all manufacturing processes that generate industrial wastewater, all wastewater treatment processes, and all chemical / hazardous waste storage facilities. Include locations of all water supplies and all wastewater discharges. Number manufacturing processes and sewer outfalls to correlate with other information provided in this application.

{XV} Process Flow Diagram: Submit a Process Flow Diagram to the EPD that illustrates the flow of industrial wastewater through the facility. Identify all manufacturing processes that generate industrial wastewater, and all wastewater treatment system components. Include component sizes and volumes, as well as system flow rates. Ensure that process flow inputs and outputs establish an accurate water balance for the facility.

{XVI} New Permit Application with >10,000 GPD or Treatment on site: All new permit applications that have >10,000 GPD or some kind of Wastewater Treatment on site. The applicant must obtain an Industrial Wastewater Indirect Discharge request Application (IDR) Form. The forms are available by down loading from the State of New Hampshire DES web page. <http://des.nh.gov>

{XVII} Permit Application Submittal: All permit application submittals must include the following items:

1. *Permit Application*
2. *Slug Control Plan*
3. *Baseline Monitoring Report or Permit Renewal Report*
4. *Facility Site Plan*
5. *Process Flow Diagram*

Submit to:

Pretreatment Supervisor
City of Manchester Department of Highways
Environmental Protection Division (EPD)
300 Winston Street
Manchester, New Hampshire 03103

{XV} Certification: An authorized representative of the facility shall sign below to indicate that all information provided herein is accurate and complete. The person who signs this application will be deemed the signatory authority for the facility.

Printed Name of Authorized Representative

Title

Signature of Authorized Representative

Date

(Use additional paper to describe processes if necessary)